S

	HEDULE B (FEC Form 3) EMIZED DISBURSEMENTS	Use separate sc for each categor Detailed Summa	y of the	FOR LINE NUMBER: (check only one) 17
	r information copied from such Reports and Statemen for commercial purposes, other than using the name a			person for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full) Adam Hasner for US House			
	Full Name (Last, First, Middle Initial) Tonie L. Bense			Date of Disbursement
	Mailing Address 1405 W Beach Dr			04 12 2012
	City State Panama City FL	Zip Code 32401-1965		Amount of Each Disbursement this Period
	Purpose of Disbursement Refund: Refund			2500.00 Transaction ID : B96D0C32D0ECD4662AB6
	Candidate Name		Category/ Type	1141104511011112 1 25525552222 1 1 1 1 1 1 1 1 1 1
		For: 2012 nary General er (specify)		
В.	Full Name (Last, First, Middle Initial) Marc Goldman Mailing Address 1500 South Ocean Blvd.			Date of Disbursement M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	501-S City State Zip Code			
	Boca Raton FL Purpose of Disbursement	33432-8529	Γ	Amount of Each Disbursement this Period 2500.00
	Refund: Refund Candidate Name		Category/	Transaction ID : B15B86902A3FC4BD3BF7
			Type	
	State: District: Full Name (Last, First, Middle Initial)			
C.	Martin Garcia			Date of Disbursement
	Mailing Address 5216 W Neptune Way			04 122012
	City State Tampa FL	Zip Code 33609-3639		Amount of Each Disbursement this Period
	Purpose of Disbursement Refund: Refund			1000.00
	Candidate Name		Category/ Type	Transaction ID : B2F74C87AD602441BB34
	Office Sought: House Disbursement			
_	State: District:			
SI	JBTOTAL of Disbursements This Page (optional)			6000.00

TOTAL This Period (last page this line number only).....